

Department of
the Secretary of State

Bureau of Motor Vehicles

Matthew Dunlap
Secretary of State

M. F. Chip Gavin
Deputy Secretary of State

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Director, Division of Vehicle Services

STATE OF MAINE
2006
RENEWAL APPLICATION FOR TRAILER TRANSIT LICENSE
Reference Title 29-A Section 462-8

Please submit a copy of your insurance card.

Federal ID Number: _____
DOT Number _____

I (we) _____ with a place of business at _____,
(Give trade name if one is used) (Street Address)
_____, _____,
(City) (State) (Zip)

List any other Maine locations where business will be conducted under the same license:

Check if: _____ Individual _____ Partnership _____ Corporation

List names and address (PO Box not acceptable) of each partner or officer of the corporation:

I (we) hereby make application for a Trailer Transit License and affirm that I (we) have received a copy of the Rules issued by the Secretary of State, Bureau of Motor Vehicles. I (we) understand the Rules provided, and I (we) are able to comply with all applicable laws and rules.

(Authorized Signature)

(Date)

(Title)

(Telephone Number)

Number of Plates	x \$20.00	=	\$
Licensing Fee			\$ 150.00
Total Fees			\$
Total Fees			\$

**Please attach verification
of insurance (insurance
card, application or
binder) to this
application.**

Motor Vehicle Use Only	<u>Plate #</u>
# of Plates: _____	